

# SUMMIT INSURANCE AGENCY LLC

3523 45TH ST S  
Fargo, ND 58104

Phone: (701)552-2302 | Fax:

April 04, 2024

JESSE CRAIG  
1405 1ST AVE N  
Fargo, ND 58102

JESSE CRAIG:

Attached is a copy of the Schedule K-1 and supplemental K-1 information for SUMMIT INSURANCE AGENCY LLC, to assist you in preparing your personal income tax return.

If you have questions regarding the information received, submit your questions to the following address:

ACCOUNTING  
SUMMIT INSURANCE AGENCY LLC  
3523 45TH ST S  
Fargo, ND 58104

Sincerely,

CHRIS KOTTSICK  
PRESIDENT

Enclosure

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Schedule K-1  
(Form 1120-S)****2023**Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or tax year

beginning 2023 ending \_\_\_\_\_**Shareholder's Share of Income, Deductions,  
Credits, etc.**

See separate instructions.

<b>Part I Information About the Corporation</b>		<b>Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items</b>	
<b>A</b> Corporation's employer identification number <b>5689</b>		<b>1</b> Ordinary business income (loss) <b>12,264</b>	<b>13</b> Credits
<b>B</b> Corporation's name, address, city, state, and ZIP code <b>SUMMIT INSURANCE AGENCY LLC</b>  <b>3523 45TH ST S</b>  <b>Fargo ND 58104</b>		<b>2</b> Net rental real estate income (loss)	
		<b>3</b> Other net rental income (loss)	
<b>C</b> IRS Center where corporation filed return <b>Ogden</b>		<b>4</b> Interest income	
<b>D</b> Corporation's total number of shares Beginning of tax year . . . . . <b>1,000</b> End of tax year . . . . . <b>1,000</b>		<b>5a</b> Ordinary dividends	
		<b>5b</b> Qualified dividends	<b>14</b> Schedule K-3 is attached if checked . . . . . <input type="checkbox"/>
		<b>6</b> Royalties	<b>15</b> Alternative minimum tax (AMT) items
		<b>7</b> Net short-term capital gain (loss)	
		<b>8a</b> Net long-term capital gain (loss)	
		<b>8b</b> Collectibles (28%) gain (loss)	
		<b>8c</b> Unrecaptured section 1250 gain	
<b>Part II Information About the Shareholder</b>		<b>9</b> Net section 1231 gain (loss)	<b>16</b> Items affecting shareholder basis <b>C* STMT</b>
<b>E</b> Shareholder's identifying number <b>9606</b>		<b>10</b> Other income (loss)	<b>D 13,445</b>
<b>F</b> Shareholder's name, address, city, state, and ZIP code <b>JESSE CRAIG</b>  <b>1405 1ST AVE N</b>  <b>Fargo ND 58102</b>			
<b>G</b> Current year allocation percentage . . . . . <b>12.50000 %</b>			<b>17</b> Other information <b>AC 61,877</b>
<b>H</b> Shareholder's number of shares Beginning of tax year . . . . . <b>125</b> End of tax year . . . . . <b>125</b>		<b>11</b> Section 179 deduction	
<b>I</b> Loans from shareholder Beginning of tax year . . . . . \$ _____ End of tax year . . . . . \$ _____		<b>12</b> Other deductions	<b>V* STMT</b>
<b>For IRS Use Only</b>		<b>18</b> <input type="checkbox"/> More than one activity for at-risk purposes*	
		<b>19</b> <input type="checkbox"/> More than one activity for passive activity purposes*	
	* See attached statement for additional information.		

**Schedule K-1 Supplemental Information****2023**

Shareholder's name

**JESSE CRAIG**

Shareholder's ID Number

**9606**

Name of S Corporation

**SUMMIT INSURANCE AGENCY LLC**

S Corporation's EIN

**5689**

## Form 1120S Schedule K-1 - Line 16

Code	Description	Amount
C	Other Nondeductible Expenses	28
	Meals	28
	<b>Total</b>	<b>28</b>

**Schedule K-1 Distribution Information**

(This page is not filed with the return. It is for your records only.)

**2023**

Shareholder's name

JESSE CRAIG

Name of S Corporation

SUMMIT INSURANCE AGENCY LLC

Shareholder's ID Number

9606

S Corporation's EIN

5689

Date of Distribution	Total Amount of Distribution	Ownership % at Date of Distribution	Shares	Shareholder's Pro Rata Share of Distribution
12-31-2023	107,557	12.50	125.00000	<u>13,445</u>
<b>Total</b>				<u><u>13,445</u></u>

**STATEMENT A - QBI Pass-through Entity Reporting**

Information Reported in Accordance with Section 199A-6

Schedule K-1, Line 17, Code V

(This page is e-filed with the return. Include it if paper-filing.)

**2023**

Name(s) as shown on return

**SUMMIT INSURANCE AGENCY LLC**

Tax ID Number

**5689**

Name(s) as shown on K1

**JESSE CRAIG**

Tax ID Number

**9606**

Line No.	Description of Trade or Business	Taxpayer Identification Number	PTP	Aggregated	SSTB
1	SUMMIT INSURANCE AGENCY LLC	5689			No

LINE NUMBER	NO. 1	NO. ____	NO. ____	NO. ____	NO. ____	NO. ____
Ordinary Business Income (Loss)	12,264					
Rental Income (Loss)						
Royalty Income (Loss)						
Section 1231 Gain (Loss)						
Other Income (Loss)						
Section 179						
Other Deductions						
W-2 Wages	16,663					
Unadjusted Basis Immediately After Acquisition						
Section 199A (REIT) Dividends						

Basis is reported on Form 7203 and must be determined at the shareholder level. Consult your tax advisor.

Shareholder Number:	TIN:	9606	Tax year ending:	12-31-2023	Ownership %:	12.500000
Shareholder Name:	JESSE CRAIG					
Corporation Name:	SUMMIT INSURANCE AGENCY LLC					EIN 5689

**Stock basis**

1	Stock basis, beginning of year (Not less than zero)		1		
2	Additional Capital Contributions of Stock Purchased		2	60,000	
3	Increases for income and gain items:				
a	Ordinary Income (Sch K-1, Line 1)	a	12,264		
b	Real Estate Rental Income (Sch K-1, Line 2)	b			
c	Other Rental Income (Sch K-1, Line 3c)	c			
d	Interest, Dividends & Royalties (Sch K-1, Lines 4, 5 & 6)	d			
e	Capital Gain (Sch K-1, Lines 7 & 8a)	e			
f	Other Portfolio Income (Sch K-1, Line 10a)	f			
g	Section 1231 Gain (Sch K-1, Line 9)	g			
h	Other Income (Sch K-1, Line 10)	h			
	Total Income and Gain Items (Total lines 3a-3h)	3a-h	12,264		
i	Increase for Non-Taxable Income (Sch K-1, Lines 16a & b)	3i			
j	Increase for Excess Depletion Adjustment	3j			
k	Increase from Recapture of Business Credits (See IRC § 49(a), 50(a), 50(c)(2) & 1371(d))	3k			
l	Gain from 179 asset disposition	3l			
4	Stock Basis Before Distributions (Add lines 1 through 3)	4	72,264		
5	Reduction for Non-Taxable Distributions (Sch K-1, Line 16d)	5	13,445		
6	Stock Basis Before Non-Ded. Expense & Depletion (Cannot be negative)	6	58,819		
7a	Decrease for Non-Deductible Expense/Credit Adj (Sch K-1, Line 16c & 13)	a	28		
b	Decrease for Depletion (Sch K-1, Line 17r)	b			
8	Stock Basis Before Allowable Losses & Deductions (Cannot be negative)	8	58,791		
9	Decreases for Loss and Deduction items				
a	Ordinary Loss (Page 2, Col e, Line 9a)	a			
b	Real Estate Rental Loss (Page 2, Col e, Line 9b)	b			
c	Other Rental Loss (Page 2, Col e, Line 9c)	c			
d	Capital Loss (Page 2, Col e, Line 9d)	d			
e	Other Portfolio Loss (Page 2, Col e, Line 9e)	e			
f	Section 1231 Loss (Page 2, Col e, Line 9f)	f			
g	Other Loss (Page 2, Col e, Line 9g)	g			
h	Charitable Contributions (Page 2, Col e, Line 9h)	h			
i	Section 179 Expense (Page 2, Col e, Line 9i)	i			
j	Portfolio Income Expenses (Page 2, Col e, Line 9j)	j			
k	Other Deductions (Page 2, Col e, Line 9k)	k			
l	Interest Expense on Investment Debt (Page 2, Col e, Line 9l)	l			
m	Total Foreign Taxes Paid/Accrued (Page 2, Col e, Line 9m)	m			
n	Section 59(e) Expenditures (Page 2, Col e, Line 9n)	n			
	Total Loss and Deduction Items (Total Lines 9a-9n)	9a-n			
o	Other decreases (Page 2, Col e, Line 9o)	9o			
p	Loss from 179 asset disposition (Page 2, Col e, Line 9n)	9p			
	Total Decrease for Loss and Deductions Items and Business Credits	9			
10	Less: net increase applied to debt basis	10			
11	Stock Basis at End of Year (Cannot be negative)	11	58,791		

**Debt Basis**

12	Debt basis at beginning of year (not less than zero)	12			
13	New loans to corporation during year	13			
14	Restoration of Debt Basis (Line 10)	14			
15	Less: Loans repaid by corporation during the year	15			
16	Less: Applied against excess loss and deductions / non-deductible items	16			
17	Debt basis at the end of tax year (combine lines 12-16) (not less than zero)	17			
18	Shareholder's total basis at end of tax year (combine lines 11 and 17)	18	58,791		

**Carryover**

19	Total Beginning of year				
20	Add: Losses and deductions this year		28		
21	Less: Applied this year		28		
22	End of year (Not less than zero)		0		

## Allocation of Losses and Deductions

2023

Keep for your records.

Shareholder Number:	TIN: 9606	Year Ended: 12-31-2023	Ownership %: 12.500000
Shareholder Name: JESSE CRAIG			
Corporation Name: SUMMIT INSURANCE AGENCY LLC			EIN 5689

IMPORTANT: Loss limitations are applied at the individual shareholder level. This worksheet is informational only and may not match actual losses and deductions reported on Form 7203.

		(a) Beginning of Year Losses and Deductions	(b) Current Year Losses and Deductions	(c) Total Losses and Deductions	(d) %	(e) Allocable Losses and Deductions in Current Year	(f) Disallowed Losses and Deductions (Carryover to Next Year)
9a Ordinary losses from trade or business	(Sch K, Line 1)						
b Net losses from rental real estate activities	(Sch K, Line 2)						
c Net losses from other rental activities	(Sch K, Line 3c)						
d Net short-term capital losses	(Sch K, Lines 7 & 8a)						
d Net long-term capital losses							
e Other portfolio losses	(Sch K, Line 10a)						
f Net losses under Section 1231	(Sch K, Line 9)						
g Other losses	(Sch K, Line 10e)						
h Charitable contributions	(Sch K, Line 12a-g)						
i Section 179 expense deduction	(Sch K, Line 11)						
j Portfolio income expenses	(Sch K, Line 12l)						
k Other deductions	(Sch K, Ln 12, i,m-o,s)						
l Interest expense on investment debts	(Sch K, Line 12h)						
m Foreign taxes paid or accrued	(Sch K, Line 16f)						
n Section 59(e) expenditures	(Sch K, Line 12j)						
o Other decreases							
p Loss from 179 asset							
Total deductible losses and deductions							
7a Nondeductible expenses & credit adj	(Sch K, Line 16c & 13)		28	28	100.000000	28	
b Oil and gas depletion	(Sch K, Line 17r)						
Total nondeductible losses and deductions			28	28		28	
Totals			28	28		28	

**Schedule K-1 Supplemental Information****2023**

Shareholder's name

**JESSE CRAIG**

Name of S Corporation

**SUMMIT INSURANCE AGENCY LLC**

Shareholder's ID Number

**9606**

S Corporation's EIN

**5689****Schedule K-3 Notification**

The corporation has met the following criteria for tax year 2023, presently exempting it from filing Schedule K-3 (Form 1120-S), Shareholder's Share of Income, Deductions, Credits, etc. - International:

Criteria 1 - Corporation had no or limited foreign activity

Criteria 2 - Each of the shareholders was a U.S. citizen, resident alien, or certain domestic trust

With respect to the corporation meeting criteria 1 and 2, shareholders are hereby notified they will not be receiving a Schedule K-3 from the corporation unless the shareholder specifically requests the schedule.

A request for a Schedule K-3 is time sensitive and should be made as soon as possible.





**SCHEDULE K-1 (FORM 60)**  
OFFICE OF STATE TAX COMMISSIONER  
SFN 28738 (12-2023)

☐ Final ☐ Amended

**2023**

**Corporation's tax year:**

☒ **Calendar year 2023** (Jan. 1 - Dec. 31, 2023)

☐ **Fiscal year:** Beginning \_\_\_\_\_, 2023, Ending \_\_\_\_\_, 20\_\_\_\_

**Shareholder's Share of North Dakota Income (Loss), Deductions, Adjustments, Credits, and Other Items**

► See separate instructions

**Part 1 Corporation information**

**A** Corporation's federal EIN

5689

**B** Corporation's name, address, city, state, and ZIP code

SUMMIT INSURANCE AGENCY LLC  
3523 45TH ST S  
Fargo, ND 58104

**Part 2 Shareholder information**

**C** Shareholder's SSN or FEIN (from Federal Schedule K-1)

9606

**D** Shareholder's name, address, city, state, and ZIP code  
(from Federal Schedule K-1)

JESSE CRAIG  
1405 1ST AVE N  
Fargo, ND 58102

**E** What type of entity is this shareholder? INDIVIDUAL

**F** If shareholder is an individual, estate, or trust, shareholder is a:

☒ **Full-year resident** of North Dakota ☐ **Part-year resident**  
☐ **Full-year nonresident** of North Dakota of North Dakota

**G** Is this an eligible nonresident shareholder who  
elected to be included in a composite filing? ☐ Yes ☒ No

**H** Shareholder's percentage of stock ownership for tax year  
(from Federal Schedule K-1): 12.50 %

**Part 3 All shareholders:  
North Dakota adjustments and tax credits**

1. Interest from U.S. obligations . . . . .
2. Renaissance zone income exemption . . . . .
3. New or expanding business exemption . . . . .
4. Renaissance zone:
  - a. Historic property preservation credit . . . . .
  - b. Renaissance fund organization credit . . . . .
  - c. Nonparticipating property owner credit . . . . .
5. Seed capital investment credit . . . . .
6. Agricultural commodity processing  
facility investment credit . . . . .
7. Biodiesel/green diesel fuel blending credit . . . . .
8. Biodiesel/green diesel fuel sales equipment  
credit . . . . .

9. Employer internship program credit . . . . .
10. Research expense credit . . . . .
11. a. Endowment fund credit (Schedule QEC). . . . .
- b. Contribution amount (Schedule QEC) . . . . .
- c. Endowment fund credit (ND Schedule K-1). . . . .
- d. Contribution amount (ND Schedule K-1) . . . . .
12. Workforce recruitment credit . . . . .
13. Wages paid to mobilized employee credit . . . . .
14. Nonprofit private primary school credit . . . . .
15. Nonprofit private high school credit . . . . .
16. Nonprofit private college credit . . . . .
17. Angel investor credit (for investments  
made after June 30, 2017) . . . . .
18. Automation credit . . . . .
19. Develop. disabled/mentally ill employee credit . . . . .
20. Maternity home, child placing agency, or  
pregnancy help center credit . . . . .
21. Apprenticeship tax credit . . . . .

**Part 4 Nonresident individual, estate, or trust  
shareholder: North Dakota income (loss)**

22. Corporation's apportionment factor . . . . .
23. Ordinary income (loss) . . . . .
24. Net rental real estate income (loss) . . . . .
25. Other net rental income (loss) . . . . .
26. Interest income . . . . .
27. Ordinary dividends . . . . .
28. Royalties . . . . .
29. Net short-term capital gain (loss) . . . . .
30. Net long-term capital gain . . . . .
31. Net section 1231 gain (loss) . . . . .
32. Other income . . . . .
33. Section 179 deduction . . . . .
34. Other deductions . . . . .
35. I.R.C. § 179 property disposition gain (loss). . . . .

**Part 5 All nonresident shareholders: North Dakota  
income tax withheld or composite tax paid**

36. ND distributive share of income (loss) . . . . . 0
37. North Dakota income tax withheld . . . . . 0
38. North Dakota composite income tax . . . . . 0